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ABSTRACT

This is a description of the University of Bridgeport's (UB/Connecticut) drug and alcohol abuse prevention standards and resources for students and employees. Described first are UB standards of conduct for students regarding controlled substances and alcohol. Included here are policies on the right of staff to inspect dormitory rooms, off campus incidents, open containers (areas where these are permitted and prohibited), use of alcohol at UB sponsored events (sponsorship defined, event types, alcohol not provided by sponsors, advertizing), and penalties when the policies are violated. Employee policies follow including notification rules in the event of conviction on a drug charge, risks to job performance when drugs are used and university willingness to assist those who seek treatment and counseling. A section on legal sanctions covers the appropriate portions of the Code of Ordinances for the City of Bridgeport, State of Connecticut statutes, and federal statutes and laws. The health risks related to drug abuse are detailed next. Also mentioned is the impact of substance abuse on families. Information on counseling and treatment describes possible approaches within counseling to help the person suffering from substance dependency. Available resources at UB for those seeking further information are listed with telephone numbers. (JB)

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UNIVERSITY OF BRIDGEPORT

DRUG ABUSE PREVENTION STANDARDS AND RESOURCES

October 1, 1990

Allen Longerdyke, Compiler

HE 024 544

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Major objectives of the project are to:

- increase access to the information on programs, policies, and curricula developed by Network member institutions;
- encourage the use of the ERIC system by Network member institutions;
- improve the Network's ability to know about, and share information on activities at member institutions; and
- test a model for collaboration with ERIC that other national agencies might adopt.

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University of Bridgeport
Drug Abuse Prevention Standards and Resources

The Drug-Free Schools and Communities Act Amendments of 1989 require an institution of higher education, as a condition of receiving funds or any other form of financial assistance under any federal program, to certify that it has adopted and implemented a program to prevent the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees.

As part of its drug prevention program for students and employees, the University annually distributes in writing to each student and employee the following information:

- standards of conduct that clearly prohibit the unlawful possession, use or distribution of illicit drugs and alcohol by students and employees on its property or as part of any of its activities;

- a description of applicable local, state and federal legal sanctions pertaining to the unlawful possession, use or distribution of illicit drugs and alcohol;

- a description of health risks associated with the use of illicit drugs and abuse of alcohol;

- a description of available drug and alcohol counseling, treatment, rehabilitation, and re-entry programs;

- a clear statement of the disciplinary sanctions that the University will impose on students and employees who violate the standards of conduct.

University Standards of Conduct

The unlawful possession, use or distribution of illicit drugs and alcohol by students or employees on University property or as part of any University activity is prohibited.

Controlled Substances - Policies for Students

Possession, use, sale, manufacture or distribution of illegal or controlled substances is a violation of University regulations. In addition, a student is in violation of these regulations if he/she is knowingly present where illegal substances are kept or deposited or is in the company of any person knowing that said person is illegally in possession of a controlled substance.

University professional staff retain the right to inspect student rooms and property if reasonable suspicion of illegal activity exists. (regarding room inspection see Residence Hall Contract Terms, #7). Reasonable suspicion may be generated by observable drugs or drug paraphernalia and/or other evidence of drug usage, and may result in confiscation of such materials.

Students who are accused of violating these regulations will face University disciplinary actions. If found guilty as a result of such disciplinary actions, a student will face the following penalities:

For "knowing presence" and/or possession of drug paraphernalia, a minimum penalty of probation;
For "possession" and "use", a minimum penalty of suspension
For sale, manufacture or distribution, a minimum penalty of indefinite suspension to expulsion.

In addition the University may seek criminal prosecution in these matters according to federal, state and/or local criminal codes that pertain to illegal or controlled drugs.

The University is also concerned about off-campus behavior that results in arrest for an alleged violation of criminal law regarding illegal drug usage, sale or manufacture. Such arrests will be considered by the Disciplinary Counselor for on campus prosecution.
In order to preserve the academic integrity of the community the University will vigorously pursue investigations and enforcement of these policies both on and off campus. The University of Bridgeport abides by federal, state, and local laws.

Alcohol Policy and Procedures

Diversity of opinion and freedom of choice are concepts which have traditionally been part of the higher education philosophy. This freedom requires the exercise of personal responsibility, a responsibility that includes the obligation to make informed decisions regarding the use or non-use of alcoholic beverages. Because the mission of a University, however, is pursuit of higher learning and the personal development of its students, the promotion or use of alcohol by the University or its constituent groups is not compatible with that mission. Therefore, this policy, with its procedure, provides clear, definite guidelines for the appropriate use of alcohol consistent with the mission of the University.

Policy

I. The University will strive to uphold all state and local laws relating to the possession, consumption, service and sale of alcoholic beverages as outlined in the statutes and ordinances that follow this policy.

II. The University sets the following locational limits to the possession of open containers, consumption, sale or service of alcohol beverages by its members.
   A. Possession of open containers, consumption and service by and to those of legal drinking age that follows procedural guidelines set forth below, will be permitted at:
      - Function rooms of the John J. Cox Student Center
      - Tower Room, Bernhard Center
      - Bernhard Center Reception Areas
      - Other areas designated as permitted drinking areas on a special basis through the Office of Student Activities, (for student events) the Office of Special Events or the Provost (for all other events)

B. Possession of open containers,consumption and service of alcohol is specifically prohibited in:
- Academic classrooms and laboratories
- Residence Hall study areas
- Academic building study areas
- Public hallways and corridors of any campus building whose functions are not strictly office/clerical
- Wheeler Recreation Center
- Mertens Theatre, Bernhard Center
- City owned public property

C. Possession of open containers, consumption, or service of alcohol is generally not permitted on outdoor campus-owned areas unless approval of a special function has been granted.

D. Sales of alcoholic beverages by and to those of legal drinking age that follows procedural guidelines set forth below is permitted at:
- University Pub
- Function Rooms of the Student Center
- Tower Room, Bernhard Center
- Other areas designated as permitted sale areas on a special event basis through the Office of Special Events or the Provost

E. Sale of alcoholic beverages is specifically prohibited in:
- All Areas identified in II A. above
- All Residence Halls

F. Sale of alcoholic beverages is not permitted at outdoor campus areas unless approval for a function has been granted and all procedural guidelines have been met.

III. The University sets the following policy and procedures relating to alcohol use at events sponsored by University members or organizations.

A. Definitions

1. Sponsorship

a. Individual sponsor - any individual who is personally responsible for an activity
-member of UB community (student, faculty, administrator, alumni)
-non-member of UB community

b. Organization sponsor - any organization recognized by Student Activities, Office of Special Events or Provost with appropriate form for the event.

2. Event Types

a. Closed Private Event - Any meeting, lecture, party or performance where attendance will not exceed 50. Attendance is limited to members of the sponsoring organization.

b. Open Private Event - Any meeting, lecture, party or performance where attendance will not exceed 100. Attendance is limited to members and escorted guests if sponsored by an organization.

c. Closed Public Event - Any meeting, lecture, party or performance which is open to any or all members of the University community and/or their immediate families.

d. Open Public Event - Any meeting, lecture, party or performance which is not limited to members of the University community.

e. Off-Campus Events - Any meeting, lecture, party or performance held off university premises, sponsored or co-sponsored by members of the University community or member organiztions of the Univerity acting as agents of the University or using the University's good name in promoting an event.

B. Alcohol Use by Event Type:

1. Alcohol may be possessed and consumed by persons of legal age at closed private, open private, and closed public events if they take place in approved areas and procedures on non-sponsored alcohol use and advertising are followed. A University official must approve and attend all student sponsored events.
2. Alcohol may be served by and to persons of legal age at closed private, open private, and closed public events if they take place in approved areas and follow procedures on advertising. Closed public events are limited in attendance to persons of legal age.
3. Alcohol may be sold by and to persons of legal age at closed private, open private, closed public and open public events, if they take place in approved areas, procedures or temporary liquor permit has been obtained, and all persons in attendance are of legal drinking age.
4. The possession of open containers, consumption, service or sale of alcoholic beverages are strictly prohibited at concerts and intercollegiate sporting events. This prohibition does not extend to private of closed public events held in conjunction with concerts or sporting events provided they are held in separate rooms or facilities.
5. University policy and procedures relating to alcohol use are to be followed at all off-campus events sponsored or co-sponsored by members of the University community.
6. Exceptions:
   a. No undergraduate organization or undergraduate private individual may obtain a temporary liquor permit for University facilities.
   b. No admission charge or collection is permitted if alcohol is to be served or sold at any private event attended by underage individuals.
   c. Admission charges or collection is permitted at public events holding temporary liquor permits.

C. Possession/Consumption of alcoholic beverages not provided by the sponsor.

Personal possession and consumption (by persons of legal age) of alcohol is permitted at those private and public events approved for same by the Office of Student Activities (students) the Office of Special Events (others) or the Provost (others) provided the following procedures are followed:

1. Only those of legal drinking age are permitted to possess or consume.
2. A sound procedure for determining proof of age is employed upon admission to the event.
3. Person violating procedures are removed and reported to appropriate University personnel.
4. A limit of not more than one six pack of beer (unopened) or one quart of wine (unopened) is permitted per legal age patron. At events where attendance will exceed 100 no other beverages or containers may be brought in by patrons.
5. Legal drinking age and risk of penalty are posted prominently at entrance of the event.
6. Sponsors of public events which permit alcohol use and where attendance exceeds 100, must provide food and non-alcoholic drinks.

7. Any open private or public event permitting alcohol must have a non-alcohol theme as its primary purpose.
8. Hard liquor may be permitted under special circumstances by the Office of Student Activities, Office of Special Events, or Provost as noted above. Such circumstances include but are not limited to:
   a. when full dinner is served
   b. at semi-formal events on approval of Director of Student Activities.
   c. at law/graduate sponsored and attended event
   d. at non-undergraduate student sponsored events

D. Advertising
1. No public advertising is permitted for any private event.
   a. Open private event guests are permitted by advance invitation only.
   b. An individual sponsor may be required to provide a guest list in advance of the event to building manager or responsible University office.
2. Only printed, on-campus advertising is permitted for closed public event. No radio or TV spots.
3. No mention of alcohol or alcohol related language or pictures is permitted in any advertising for any public event for which there is no liquor permit.
4. Individuals and organizations are expected to conform to the Alcohol Marketing Guidelines as adopted from NASPA and related University policies as stated in the UB Key.

IV. The University will pursue the following penalties when the above stated policies or procedures are violated on or off campus:

A. Violation of the University's alcohol policies by a sponsor or sponsoring organization may result in loss of the privilege to conduct future events.
B. Organizational sponsors may be held legally responsible for misconduct occurring at, or as a direct result of, the events.
C. Individual sponsors, organizations and their individual members may be held financially responsible for any property damage incurred by the University as a direct result of an event.
D. Drunkeness, excessive drinking, illegal drinking or any infraction of local, state or university regulations governing the use of alcohol beverages may result in disciplinary sanctions as outlined in the Key to UB.
E. Violation of University alcohol policy will be adjudicated by the appropriate University officer or governing body. Individual student violations may be adjudicated by the Disciplinary Counselor.

Employee Policies

The unlawful manufacture, distribution, dispensation, possession or use of illegal drugs is prohibited on University property.

As a condition of employment, employees must abide by this prohibition and must notify the office of Personnel Administration if they have been convicted under a criminal drug statute for conduct in the workplace, such notification to be made no later than five days following said conviction.

The use of illegal drugs, on or off duty, is inconsistent with law-abiding behavior expected of all citizens. Employees who use illegal drugs, on or off duty, tend to be less productive, less reliable, and prone to greater absenteeism.

The use of illegal drugs, on or off duty, by employees can impair the ability of those employees to perform tasks that are critical to proper performance and can also result in the potential for accidents on duty and poses a serious threat to health and safety.

The use of illegal drugs, on or off duty, by employees in certain positions can result in less than the complete reliability, stability, and good judgement that are consistent with proper job performance.

Employees in violation of this University policy will, whenever practicable, be accommodated in seeking counseling and treatment. However, the unlawful manufacture, distribution, dispensation, possession or use of illegal drugs on University property is sufficient cause for discipline up to and including termination of University employment. Disciplinary procedures set forth in collective bargaining agreements between the University and effected employee unions will be complied with in the administration of this policy.

Local, State and Federal Legal Sanctions Concerning Alcohol and other Drugs.

Code of Ordinances, City of Bridgeport

Drinking of alcoholic beverages in parks, beaches, or playgrounds prohibited without a permits. Sec. 22-17.

Beer kegs or similar single containers of beer which contain in excess of one quart are prohibited in any public park, beach or playground unless a permit is obtained from the superintendent of parks. Before any permit may be issued, the person or organization seeking such permit shall file an application with the superintendent of parks setting forth (a) the name, address, and telephone number of the person or organization filing the application; (b) the park and the portion of the park requested for such use; (c) the dates and hours for which the use is requested; and (d) the approximate number of person expected.

In deciding whether to grant such permit, the superintendent of parks shall consider (1) the nature of the subject park property and its adaptability to such use; (2) the number of persons who will be consuming alcoholic beverages; (3) the past experience with this person or organization in terms of their use and consumption of alcoholic beverages; (4) the past experience with the drinking of alcoholic beverages in the park or particular portion of the park which the applicant proposes to use; (5) the effect this use of the park would have on the neighborhood adjacent to said park property; and (6) the nature of the organization that would be using such park property under such permit.

Any person or orgnization aggrieved by any determination of the superintendent of parks under any provision of this section may appeal such determination to the board of park commissioners by setting forth the details of such grievance in a letter to it, with a copy to the superintendent of parks, within seven (7) days after a determination by the superintendent of parks with regard to said application.

Any person violating this section shall be subject to a fine as provided in section 1-8 of this Code. (ord. of 6-16-80)

Violation of this code may result in a $100.00 fine.

State of Connecticut Statutes

Connecticut statutes cover a wide range of drug offenses, including the offer, the sale and the possession with intent to sell, the gift, and the mere possession of various types of ~~of~~ drugs {21a Conn. Gen. Stat. Sections 277, 278, 279 (1988)}. Among the other provisions, the state laws create the following mandatory minimum prison sentences for first-time offenders who are not "drug-dependent" persons:

- Five years for the manufacture, sale, or possession with intent to sell, of one ounce or more of heroin, methadone, or cocaine (including "crack"), or one-half gram or more of cocaine in a freebase form, or five milligrams or more of LSD;

- Five years for the manufacture or sale, or possession with intent to sell, of any narcotic, hallucinogenic or amphetamine-type substance, or one kilogram or more of a cannabis-type substance (which includes marijuana);

- Five years for the offer or gift of any of the above drugs in the respective amounts.

Conviction for possession of drugs carries no mandatory minimum sentence but the following maximum sentences do exist for first-time offenders:

- Seven years or $50,000 or both for possession of any quantity of a narcotic, including cocaine and "crack", morphine, or heroin;

- Five years or $2,000 or both for possession of any quantity of a hallucinogen (such as LSD or peyote) or four ounces or more of a cannabis-type substance (which includes marijuana);

- One year or $1,000 or both for possession of less than four ounces of a cannabis-type substance, or any quantity of a controlled drug, such as amphetamines or barbiturates.

Convictions for drug-related offenses involving minors or in the proximity of elementary or secondary schools carry the following mandatory sentences

in addition and consecutive to any term of imprisonment imposed for violations of the statutes which prohibit the distribution, sale and possession with intent to sell of various types of drugs:

- Two years for the distribtion, sale offer or gift of any controlled substance to a person under eighteen years of age and who is at least two years younger than the person violating a statute prohibiting the distribution, sale or possession with intent to sell of various types of drugs;

- Three years for the manufacture, distribution, sale, transport or possession with intent to sell, dispensation, offer or gift to another person of any controlled substance within one thousand feet of the real property comprising a public or private elementary or secondary school;

- Three years for employing, hiring, using, persuading, inducing, enticing or coercing a person under eighteen years of age to violate a statute prohibiting the manufacture, sale, possession with intent to sell, offer or gift of any controlled substance.

Actual sentences depend on the severity and the circumstances of the offense and the character and background of the offender.

Connecticut law also prohibits the sale, delivery or giving of alcohol to minors, intoxicated persons or habitual drunkards (Conn. Gen. Stat. Sections 30-86) and provides the following penalities for convictions:

- Eighteen months or $1,500 or both for the delivery or giving of alcoholic liquor to a minor.

Federal Statutes and Laws

Federal law also penalizes the manufacture, distribution, possession with intent to manufacture or distribute, and simple possession of drugs (controlled substances") Controlled Substances Act 21 U.S.C. Sections 841,843(b),844,845,846(1988). The law sets the following sentences for first-time offenders:

- A minimum of ten years and a maximum of life imprisonment or $4,000,000 or both for the knowing or intentional manufacture, sale or possession with intent to sell, of large amounts of any narcotic, including heroin, morphine, or cocaine (which includes "crack"), or of phencyclidine (PCP), or of LSD, or of marijuana(1,000 kilograms or more);

- A minimum of five years and a maximum of forty years or $2,000,000 or both for similar actions involving smaller amounts of any narcotic, including heroin, morphine, or cocaine (which includes "crack"), or of phencyclidine (PCP), or of LSD, or of marijuana (1,100 kilograms or more);

- A maximum of five years or $250,000 or both for similar actions involving smaller amounts of marijuana (less than 50 kilograms), hashish, hashish oil, PCP, or LSD, or any amounts of amphetamines, barbiturates, and other controlled stimulants and depressives;

- Four years or $30,000 or both for using the mail, telephone, radio or any other public or private means of communication to commit acts that violate the laws against the manufacture, sale, and possession of drugs;

- One year or $1,000 or both for possession of any controlled substance. (The gift of a "small amount" of marijuana is subject to the penalities for simple possession.)

Penalities may be doubled, however, when a person at least 18 years old (1) distributes a controlled substance to a person under 21 years of age and (a term of imprisonment for this offense shall not be less than one year) or (2) distributes, possesses with intent to distribute, or manufacture a controlled substance in or on, or within one thousand feet of, the real property comprising a public or private elementary or secondary school, or a public or private college. Any attempt or conspiracy to commit one of the above federal offenses, even if unsuccessful, is punishable by the same sentence prescribed for that offense. A first-time offender may receive only probation and later have the charge dismissed. Although in some cases the federal penalties seem somewhat lighter, it is not possible to "trade" a state charge for a federal one.

Health Risks Related to Drug Abuse

Alcohol

Alcoholism is a disorder that has profound psychological, biological and societal effects. Directly, it affects over 18 million people; indirectly, it affects another 56 million. Alcohol abuse is usually characterized by one of three different patterns: (1) regular daily intoxication, (2) drinking large amounts of alcohol at specific times, or (3) periods of sobriety interspersed by periods of heavy daily drinking. The course of the disorder is usually progressive and physical dependence can develop; if this happens, serious symptoms, sometimes life-threatening, can develop when alcohol is withdrawn. Short term effects of alcohol use can include depression, gastritis, liver diseases, automobile accidents, and domestic violence. Chronic alcohol abuse can produce irreversible changes, including dementia, sexual impotence, cirrhosis of the liver and heart disease. Death can occur either as a complication of one of these chronic problems, or acutely, secondary to alcohol intoxication by poisoning or aspiration of vomitus or as the result of an automobile accident while driving intoxicated.

Marijuana (Cannabis)

Marijuana is the most commonly used illegal drug in the United States. Though physiological consequences do depend on frequency, duration and quantity, marijuana use is associated with impairment of short-term memory, concentration, judgement, perception and fine motor skills.

Thus the use of this drug increases the risk of machinery or motor vehicle accident and injury for four to six hours after ingestion. Impairment of memory may last for three to six months, even if use of the drug is completely discontinued. This is because the active chemical in marijuana (THC) remains stored in body fat cells long after ingestion.

Marijuana use is associated with chronic anxiety, depression and paranoid feelings. It can also significantly exacerbate or increase underlying emotional problems. Frequent and/or ongoing use by children and adolescents may have long-term developmental consequences related to lack of motivation, apathy and difficulty managing current stresses and responsibilities, as well as making appropriate plans for the future. Pregnant women who use marijuana may be at higher risk for having children with birth defects.

Hallucinogens

This category includes drugs such lysergic acid dyethylamine (L.S.D., also known as "acid"), mescaline and peyote. These drugs cause illusions, hallucinations and impaired preception of time and space. Phencyclidine (P.C.P. or "angel dust") and amphetamine variants known as "ecstasy" are also referred to in this category though they rarely cause hallucinations in the true sense. However, they are potent drugs that have mind-altering effects and impair perception and cognition.

Hallucinogens can also produce a "bad trip" with anxiety, agitation, hallucinations and paranoia leading to impulsive behavior. After a "bad trip" the person can be subject to "flashbacks" which are recurrences of the experiences of the "bad trip" without the taking of the drug. There is concern that psychosis and impaired thinking may result after long-term use.

Cocaine

The use of cocaine, an illegal stimulant drug, has risen dramatically in the United States. Other names for it are Coke, C., Lady and Snow. Cocaine is a white powder that is snorted, injected into veins, or smoked freebase or as Crack. Crack is crystalline form of cocaine that is also known as "rock" from its small white rock-like appearance. (Speed balls are cocaine mixed with heroin, which is a particularly dangerous combination.) Crack produces the most intense cocaine high and addiction can occur after using it only once or twice. Cocaine highs are characterized by feelings of extreme happiness, a sense of limitless power and energy. However, the physical symptoms include high blood pressure and heart palpitations. A cocaine "crash" follows the "high" and includes symptoms of depression, dullness, great irritability, and paranoia. Serious medical complications occur with cocaine use such as heart attacks (even in young people), seizures, and strokes due to high blood pressure. The psychological effects of cocaine use include violence and paranoia, and personality changes as well as such symptoms as depression, anxiety and confusion. Pregnant women using cocaine have increased risk of miscarriages and still births. Newborns addicted to cocaine are irritable, unresponsive and may have malformed kidneys and genitals, as well as heart attacks and strokes. Addiction to cocaine controls all aspects of the user's life; impinges on the lives of those closest to the user; and occurs in people of all ages, classes and educational levels.

Amphetamines and Other Stimulants

In addition to cocaine there are a number of other drugs that stimulate the nervous system and are very addictive. Most of them belong to the amphetamine family of drugs. Dexedrine (present in "diet" pills) may at times be prescribed by a physician, but its use as a legitimate medication is now infrequent. Street drugs of the amphetamine group include Ecstasy and Ice. Ice is a smokable amphetamine compound that is very potent and the effects are long-lasting and devastating. The health risks of these other stimulants are similar to those described with cocaine use.

Narcotics including Heroin

There are a variety of medications that are taken to relieve pain. Most nonprescription pain relievers (such as aspirin, Tylenol, Motrin, and Nuprin) are not considered addictive. However, there is a class of stronger pain-relievers, available by prescription only. These are referred to as narcotics, most of which are opiates. Examples of these drugs include morphine, codeine, Tylenol No. 3, Darvon, Darcovet, Percocet, Percodan, Demerol, and certain prescription cough medicines. These drugs differ from the nonprescription pain relievers in their potential for abuse and dependance. With close medical supervision, these drugs may be safely used in specific medical circumstances for a limited time. However, addiction may occur and the person may not want to stop the drug when the pain has stopped. Tolerance to the drug is shown by an increase in the amount of drug necessary for the relief of pain. This becomes progressive and leads to the craving or need or larger and larger doses without which the person becomes extremely uncomfortable and physically ill. The time may come when the person "need" such a large dose of the drug that it is poisonous or lethal. Under these circumstances, coma, suffocation and death may ensue. The malignant course of this problem is similar to that of addiction to heroin.

Although heroin is not available by prescription, it is chemically in the same family and is a narcotic. The use of heroin is mainly by injection into a vein which carries the additional medical dangers of AIDS and hepatitis from use of the unclean needles and syringes.

Sedatives and Tranquilizers

The barbiturates and the benzodiazepines are two of the most commonly used groups of these drugs. The barbiturates (such as phenobarbital, seconal, and amytal) are highly addictive and can be fatal if taken in excess. Although they still have medical uses they have largely been replaced by the benzodizepines for the relief of anxiety and to promote sleep. The benzodiazepines include such drugs as Valium, Librium, Ativan, Xanax, Dalmane, Halcion and Restoril. While safe and effective at moderate doses for short periods of time (weeks), all the the benzodiazepines have a potential for physical and psychological dependence if used at higher doses for longer periods of time. Frequently the benzodizepines are abused by adults who become dependent on them because of their anti-anxiety effects. Other tranquilizers which may be abused included methalqualone (quaaludes), Doriden and Equanil.

Intoxication with benzodiazepines may occur and resembles alcoholic drunkeness. Drowsiness, slurred speech, unsteady gait, and lack of coordination are common signs. The effects of the benzodiazepines (and the barbiturates and other sedatives) add to those of alcohol and, when taken together, abuse can lead to coma and even death. Withdrawal from benzodiazepines resembles alcohol withdrawal and it is most apparent if they are stopped abruptly. Withdrawal takes place within hours to days of stopping the drug. Once a person is addicted to benzodiazepines, a physician should supervise the plan for gradually stopping them to minimize the serious effects of withdrawal.

Impact of Substance Abuse on Families

Families are often gravely affected by a substance-abusing member. This can occur on many levels. As a very direct physiological consequence, the infants of alcohol and cocaine-abusing mothers often have low birthweight and may suffer from malformations and a variety of developmental problems. Abusers often affect the economic well-being of their families as their inability to hold down a job or, in some instances, their stealing from relatives reduces the family's financial means and stability. In many cases, substance abuse leads to violence at home.

There is the obvious emotional toll of substance abuse on the functioning of individual members and the family as a whole. Family members may actively deny the problem, may become symptomatic in an effort to deflect attention from the substance-abusing member, or may assume the abuser's responsibilities at home and even at work. Very often, the family's intervention with the user and his or her problem is an essential step which encourages the abusing member to seek treatment. Support groups for family members such as Al-Anon or COC-Anon as well as family therapy can provide needed assistance to families as they grapple with the destructive effects of the user's addiction.

Counseling and Treatment for Alcohol and Drug Use

Alcohol and druge abuse are recognized as multi-faceted disorders involving psychological, environmental and biological factors. Treatment for alcohol and drug abuse aims toward abstinence as a primary goal. Since any one treatment approach may emphasize only one particular etiologic factor, therapy programs have been designed to address multiple factors and various stages of recovery. Treatment settings may, therefore, vary from an individual outpatient setting to a therapeutic inpatient community. Depending on the abuser's degree of disability, confrontation by family, friends, employers or health professionals may be the first step necessary in treatment in order to overcome the abuser's denial.

Medical attention may be necessary to address both acute and chronic, mild and potentially fatal complications of substance abuse. Medications may be used to alleviate withdrawal symptoms during detoxification and to diminish the craving for the abused substance. In the case of alcohol, medications to induce distressing physical reactions to further drinking may be an adjunct to treatment.

Educational and family therapies can outline facts and clarify myths about substance abuse and address dysfunctional patterns of interaction in family and social environments. Self-help groups such as Alcoholics Anonymous and Narcotics Anonymous are important resources for long-term support, continued abstinence and social rehabilitation. Lastly, individual and group therapy may be helpful in understanding behaviors and motivations that lead to abuse, in fostering the person's self-esteem and ability to cope with stress and in addressing related or concurrent psychological difficulties.

Available Resources at U.B.

At UB, a variety of resources exist where further information can be obtained about substance abuse and its treatment:

University Health-Wellness Center	576-4712
Substance Education and Peer Counseling Office	576-4997
Personnel Office	576-4588
University Counseling Center	576-4454

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